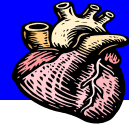
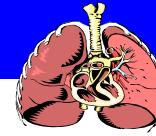


# VA Organ/Bone Marrow National Transplant Program Newsletter



A Publication of Medical /Surgical Services

May 2004

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*Message from the VA Organ/BM National Transplant Program Office:*



[www.va.gov/transplants](http://www.va.gov/transplants)

(L-R) Bev, Dr. Agarwal, Valencia, Brenda, Dr. Mathewson-Chapman

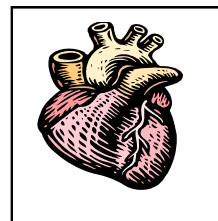
## **Greetings from the Clinical Program Manager Marianne Mathewson-Chapman PhD, ARNP**

Welcome to the inaugural issue of the newly formatted VA's Organ and Bone Marrow National Transplant Program Newsletter. This is the first volume and 2<sup>nd</sup> issue of what we hope is news worthy information concerning Medical/Surgical and Organ Transplant News. We hope to highlight all of the great work that is being performed at Transplant Centers in-house programs and sharing agreement sites as well as referring VA facilities throughout our VA Healthcare System. There have been many personnel changes in the VA senior leadership and Dr. Michael Kussman has been designated as the Acting Deputy Under Secretary for Health and also the Acting Chief Patient Care Services Officer. Dr. Madhulika Agarwal is our newest member in Medical/Surgical Services and is the Acting Chief Consultant, Medical/Surgical Services. Welcome to the transplant family. Your news and updates of best business practices are always welcome for future quarterly newsletters. Let us help you tell your "good news stories". We hope to hear from all members of the multi-disciplinary team for articles or updates of your transplant services.

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**Feature Article:**

Written By Tracy Hall, RN, CCTC  
Clinical Coordinator,  
Heart/Lung Transplant Program, Madison, WI VAMC



## Heart Transplant Referral Guidelines

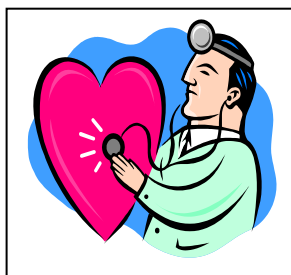
We are often asked by referring facilities for criteria to use when considering a patient for heart transplantation. We offer the following guidelines and also include a list of contraindications to be aware of when referring a patient for heart transplant:

### General Indications:

- End-stage heart disease with limited life expectancy due to ischemic cardiomyopathy, idiopathic cardiomyopathy, viral myopathy, congenital heart disease, valvular heart disease, IHSS, and re-transplant needed due to AGA, also known as accelerated graft atherosclerosis.
- Eligibility requirements:
  - VO2 max of less than 14
  - Severe angina which limits routine activity not amenable to bypass surgery and refractory to all therapeutic modalities
- Probable indications include:
  - VO2 max less than 14 with major limitation of Activities of Daily Living (ADL).
  - Unstable angina not amenable to bypass surgery and/or evidence of rapid deterioration.
- Criteria that is not sufficient alone as an indicator for transplant:
  - Left ventricular ejection fraction (LVEF) of less than 20%
  - History of class II-IV heart failure
  - VO2 Max of >15
- Contraindications for a heart transplant include:
  - Fixed pulmonary hypertension with PVR greater than 6 wood units
  - Other irreversible major organ failure
  - Active infection
  - Recent malignancy
  - HIV + (is being explored at this time)
  - Active substance abuse
  - Obesity with weight greater than 140% of calculated body weight
  - Age greater than 65 years old

We realize that putting together these packets requires a great deal of time and effort on the part of the referring facility. Some judgment and flexibility may be applied to many of these guidelines based on individual medical issues.

Example: An example of this would be a patient with end-stage heart disease who is also in renal failure: In this case the patient may be considered for a combined heart/kidney transplant. We would consider a patient for combined heart/liver if indicated. Consideration for implantation of LVAD's will be determined by the transplant center. If patients meet the above criteria, they are considered candidates for LVAD's as a bridge to transplant, if their medical condition warrants.





## SOCIAL WORK CORNER

### The Important Role of the Social Worker in Transplantation

*Written by: Patricia M. Coffey, LCSW  
Tennessee Valley Healthcare System  
VAMC, Nashville, TN*

March is National Social Work Month. What better way to highlight this critical role than to start a "social work corner" in this transplant newsletter? There is no other field that utilizes all our skills as well as in the field of organ and bone marrow transplantation. The role of the social worker with the patient and his/her support person involves a long-term relationship that begins with the initial referral received at the transplant center. I try to call each person scheduled for an evaluation to talk about policies and transplant philosophy but also to provide support. Usually their anxiety level and fear is extreme.

During the two-to-three hour evaluation, I am continuing to establish the trusting relationship, finding out information (such as childhood issues, work history, combat experience, substance use/abuse, compliance to medications and medical appointments), but also educating them as to how their life experiences affect their coping behaviors and hence their ability to follow the transplant regime. I'm often doing crisis marital counseling and providing emotional support during the interview. I also determine how dependable is the support person to follow the post-transplant activities required after the transplant. After the assessment is completed, potential problems are identified and appropriate recommendations and resource referrals are made to the team as well as to patients and their families.

There are many behavioral changes that can occur from the stress of waiting for a transplant, the surgery itself and post-transplant, including death and dying issues and side effects from the medications. Our role of social worker includes providing individual and marital counseling as well as group work. If the transplant recipient or support person is anxious, angry, or depressed they often cannot follow directions regarding medications, labs and clinic appointments etc. Our role is to help alleviate some of these emotional responses and fears of uncertainty in a professional supportive atmosphere.

The upcoming issues of this newsletter will discuss a variety of psychosocial topics and give you a chance to hear from your social work colleagues about challenging patients and the critical role of the Social Worker in the transplant evaluation and throughout the transplant process.

### VA Organ/BM National Transplant Program Update: Referrals/Transplants 1<sup>st</sup>-2<sup>nd</sup> Quarter

Written By: Brenda Salvas  
Program Manager: Kidney, Liver, Kidney-Pancreas



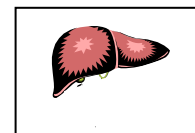
We received a lot of positive feedback from the referring VA medical centers (VAMC) regarding the first issue of the transplant newsletter released in January. We appreciate your feedback and suggestions on how to improve this newly formatted publication. One of the main recommendations was to include topics from all of the solid organ and bone marrow transplant programs, include a section from the transplant social workers and other key members of the transplant team as well as a frequently asked questions/answers (FAQ) section. **We appreciate hearing from you and encourage future comments.**

The first two quarters in this fiscal year have been busy. Here in VA National Transplant Program Office, we have received 487 solid organ and bone marrow transplant referrals; the VA Transplant Centers (VATCs) have evaluated 290 veterans and donors; and, performed 146 transplants between October 1, 2003, and March 31, 2004. We appreciate the efforts from each of the referring VAMCs, especially those VAMC's who have designated a transplant facilitator/manager to coordinate the referrals locally, and

assure that the packets are submitted with up-to-date clinical information so that our Board Members and VATC's can make an informed decision regarding your patient. If you have any questions regarding the referral process, please do not hesitate to contact VACO for guidance.

### **Liver Transplant Training: Hep C and HIV**

Written By: Brenda Salvas  
Program Manager: Kidney, Liver, Kidney-Pancreas



The Advanced Liver Disease Training Program held in Manhattan, New York, April 12-14, 2004, was a great success. The program was a collaborative effort between the Hepatitis C Resource Centers (HCRC) and the VA Organ/BM National Transplant Program. Over 120 VA employees joined us in New York City for the training program, where they had the opportunity to meet the Hepatitis C and Liver Transplant staff as well as Transplant Liver Review Board members and to network with their peers from VAMC's along the East Coast. We would like to thank the HCRC Program Office, the Planning Committee, and Faculty for providing this educational opportunity, and look forward to future programs. We actually had over 250 VA employees register for the training session, and unfortunately were not able to accommodate all. However, we are planning to repeat the program on the West Coast in September. Information regarding the repeat session will be provided to the field as soon as available, so stay tuned.



**Congratulations to Sue Gann, Liver Transplant Facilitator** at the Portland VATC. Sue has recently been honored as “**Employee of the Year**” at the Portland VAMC. Sue has been a critical member of the Portland liver transplant team for over ten years, coordinating care for those patients assigned to the program from VAMC's nationwide. The VA Organ/BM National Transplant Program joins the Portland VAMC in honoring Sue and would like to relay our thanks to her for the superlative care she provides each day to our liver transplant patients. To read more about Sue, please visit the **VA Organ/BM National Program Transplant Website** at <http://vaww.va.gov/transplant>.



#### ***Welcome new transplant center staff:***

**David (Tom) Swanson, RN**, is located at the Portland VATC. Tom is a former ward nurse caring for liver transplant patients at the Portland VAMC. He left the VA to work in the community as a trauma/OR nurse; and has recently returned to the Portland VAMC to join the liver transplant team. Welcome back, Tom!

**Debra S. Mayher, RN, MS** is located at the Pittsburgh VATC. Debra (or Debbie) is a certified clinical transplant coordinator, joining us from the University of Pittsburgh Medical Center program. Debbie brings 14 years of liver transplant experience to the VA Pittsburgh team, and will be working with the other coordinators, Cheryl Wannstedt, RN, CCTC, Lois Keyes, RN, CCTC, and Holly Woods, RN, CCTC, to care for the liver and kidney transplant patients assigned to the Pittsburgh VATC. Welcome to the VA transplant program, Debbie!

**Ann Satterly, RN, CCTC** is the new post-transplant coordinator at the Iowa City VATC. Ann joins the VA kidney transplant team, bringing over 25 years of transplant experience from the University of Iowa transplant program. Welcome to the VA, Ann!

**Dr. William Nylander** is the former Kidney Transplant Program Director and transplant surgeon at the Nashville VAMC. Recently he was selected as the new Chief of Surgery at the VA Tennessee Valley Health Care System, Nashville, TN. Although he will continue to work closely with our veteran transplant patients, he will be stepping down as the Kidney Transplant Program Director. We wish you the very best Dr. Nylander, and thank you for your ongoing support to the VA Organ/BM National Transplant Program.

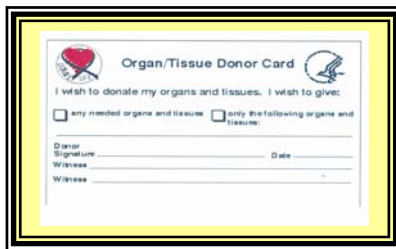
## National Donate Life Month

By: Brenda Salvas

Program Manager: Kidney, Liver, and Kidney-Pancreas

Incredible medical breakthroughs continue every day within the transplant field due to the dedication of transplant professionals and the generosity of donors and their families. *National Donate Life Month* recognizes those who help save and enhance the lives of others through organ and tissue donation. Even though hundreds of thousands of people have provided the “gift of life” through organ donation, there is still a tremendous need across the country.

Last year, the Department of Health and Human Services designated the month of April as “National Donate Life Month” to raise public awareness of the critical need for organ, tissue, marrow, and blood donations. A single donor can save or enhance other lives. While medical advances are enabling more Americans to receive life saving transplants, there are not enough donors to help everyone in need. Currently, more than 84,000 people in the United States are on the national UNOS (United Network for Organ Sharing) waiting list. Last year, almost 6,000 Americans died while waiting for a donation. VACO encourages every VAMC to discuss organ donation with all veteran patients and their families. We would like to hear how your VAMC is making a difference and assuring that all veteran patients, their families, and VA staff are aware of how they can make a difference. There are many ways each of the VAMC's can help to raise awareness about the importance of organ donation at their facility. To find out more, contact your local Organ Procurement Organization or visit the UNOS website at <http://www.donatelife.net>. Sign Up Now using the Donate a Life card on this website. We wish to express our appreciation to those living donors and families who have truly given the “Gift of Life” to our veterans. We thank our staff at VATC for their dedication and endless commitment to providing transplant services to veterans.



## FAQ: Frequently Asked Questions in VA Organ/Bone Marrow Transplants

### VA Transplant Referrals and Eligibility Requirements

**Question:** Who is eligible for transplantation through the VA system?

**Answer:** Any veteran enrolled for care in the VA health care system is eligible for consideration for transplant services through the VA Organ/BM National Transplant Program – whether he/she is service connected or non-service connected. There are many eligibility rules and regulations, so it is important for the veteran to discuss his/her options with the local VA Medical Center health care providers and eligibility staff. This is especially true for non-service connected veterans who may have co-payment responsibilities.

Veterans have two options available to them for transplant services – they can utilize their VA benefits or they can elect to use their private insurance or Medicare. If the patient opts to use his/her private insurance or Medicare benefits, the veterans does not need to be referred through the VA Organ/BM National Transplant Program located in Washington, DC, and the National Transplant Program Office will **not** cover any of the transplant expenses. If the veteran wishes to utilize his/her VA benefits, he/she must be referred to the VA Organ/BM National Transplant Program and must utilize one of the VA Transplant Centers (VATC). If the veteran goes through the VA Transplant Program, VA will cover most of the expenses involved with the transplant procedure.



# Transplant Websites

<http://www.va.gov/transplants>  
<http://vaww.va.gov/transplant>

- Guidelines in preparing transplant packets
- Documents required in a referral packet
- Directives/referral form.

<http://www.donatelife.net>

- Details in becoming a donor.

<http://www.optn.org/resources/>

- Upcoming events with UNOS.

<http://www.va.gov/directory/>

- Refer to this website to get information from a particular VA Facility.



**Transplant  
Bulletin  
Board  
Coming  
Soon**

## Upcoming Organ/BM Transplant Events

- ❖ **APOO Annual Meeting, [www.aopo.org](http://www.aopo.org)**

June 16-18 2004, Chicago

- ❖ **NATCO Annual Meeting [www.natco1.org](http://www.natco1.org)**

August 1- 4 2004, San Francisco

### **HOT TOPICS FOR FUTURE ISSUES**

\*\*\*

- How to Submit a Transplant Referral
- Living Donor Liver Transplantation
- Quality of Life and Transplants
- Developing a Electronic Transplant Referral Form
- Research Articles
- Review Board News

### **Upcoming Transplant Conference Calls**

*July 14<sup>th</sup> and October 20<sup>th</sup> at  
2:00pm ET*

VA staff involved in the  
transplant process is  
welcome to participate and  
attend the call.

Agenda and dial-in  
instructions are forwarded  
to the transplant e-mail  
group\*\* approximately two  
weeks prior to the call.

**\*\* e-mail your name to Valencia to be  
a member of the e-mail group\*\***

We welcome your articles related to any current issues related to solid organ and bone marrow transplants and psychosocial issues relating to the care of transplanted veterans. Please contact Valencia Kelly at 202-273-8983 or e-mail your articles to [Valencia.Kelly@hq.med.va.gov](mailto:Valencia.Kelly@hq.med.va.gov) Since we will be expanding our coverage, please limit articles to no more than two pages, which includes graphs or pictures. Thank You.

VA National Organ/BM Transplant Program News will be released quarterly.

Released during: **MAY, AUG, NOV, FEB.**

Submit articles by the 15<sup>th</sup> of APR, JUL, OCT, JAN

### **VA Organ/BM National Transplant Program NEWSLETTER EDITORIAL BOARD**

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